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APPLICANTS

Michel Grandjean, Andrezel, FRANCE;

** CONTINUING DATA ***** *None CC*

** FOREIGN APPLICATIONS ***** *None CC*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	<i>Colley CC</i> Examiner's Signature / Initials	FRANCE	7	20	2

ADDRESS

20350
 TOWNSEND AND TOWNSEND AND CREW, LLP
 TWO EMBARCADERO CENTER
 EIGHTH FLOOR
 SAN FRANCISCO , CA
 94111-3834

TITLE

Mixer

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